



BRIAN SANDOVAL
Governor

STATE OF NEVADA
PUBLIC UTILITIES COMMISSION

PAUL A. THOMSEN
Chairman
ALAINA BURTENSHAW
Commissioner
DAVID NOBLE
Commissioner
STEPHANIE MULLEN
Executive Director

May 26, 2016

RE: Regulated Assessment for Calendar Year 2015

Dear Public Water Utility:

Pursuant to Section 704.035 of the Nevada Revised Statute (“NRS”), please complete the enclosed Annual Revenue and Assessment Report Form and return it to the Public Utilities Commission of Nevada (“Commission”) with your remittance on or before **July 1, 2016. Forms that are incomplete will be returned to the preparer.**

The assessment rate for fiscal year 2017 is 2.34 for the Commission and 0.55 for the Bureau of Consumer Protection for a total of 2.89 mills (.00289). This rate is based on the total gross operating revenue as defined in NRS 704.033 for the period commencing January 1, 2015, and ending December 31, 2015. The minimum assessment due and payable to the Commission is \$100.00.

A separate Annual Regulatory Assessment Form must be submitted for *each* company by mail or e-payment system.

Mail: Annual Regulatory Assessment Form is available on the Commission’s website under the forms section (<http://puc.nv.gov>). Mail completed form and remittance to: Public Utilities Commission of Nevada, Attn: Fiscal Services, 1150 E. William Street, Carson City, NV 89701.

E-Payment System: Commission’s website at: <http://pucweb1.state.nv.us/pucpayments2/>. Payments can be made by selecting the **Annual Regulatory Assessment** link. For electronic payment technical assistance, please contact Rupert White at 775-684-6129.

NRS 353.1467 requires “all payments of money owed to a Nevada state agency for taxes, interest, penalties or any other obligations that, in the aggregate, amount to \$10,000 or more must be made by any method of electronic transfer of money allowed by the state agency.” Failure to transfer funds in the amount of \$10,000 or more electronically is a violation of NRS 353.1467.

Should you have any questions regarding these requirements, please contact Ann Scott at 775-684-6187.

Sincerely,

Stephanie Mullen
Executive Director

Enclosure

PUBLIC UTILITIES COMMISSION OF NEVADA
Annual Revenue and Assessment Report Form
for Calendar Year 2015

Company Name: _____
CPC No. _____
Company Address: _____

Telephone: _____
Email Address _____

Preparer Name: _____
Preparer Company: _____
Address: _____

Telephone: _____
Email Address _____

1. **ASSESSABLE REVENUE:** I/We the undersigned, under penalty prescribed in NRS 704.035, do hereby certify that total gross intrastate operating revenue as defined in NRS 704.033 and as contained in appropriate company ledgers for the above calendar year commencing January 1, 2015, and ending December 31, 2015 was:

ASSESSABLE REVENUE \$ _____

2. **ASSESSMENT:** The assessment rate for this reporting period is 2.89 mills (.00289). Your assessment for this year is the above ASSESSABLE REVENUE x .00289. **The MINIMUM assessment is \$100.**

ASSESSMENT \$ _____

3. **LATE FEE:** The fee for late payment (payment not made on or before August 1, 2016) is one (1) percent of the total unpaid balance, **or \$10, whichever is greater**, for each month or portion thereof that the assessment is delinquent. No late fee may exceed \$1,000 for each delinquent payment.

LATE FEE \$ _____

4. **AMOUNT DUE:** Total of ASSESSMENT and LATE FEE. This amount is due and payable on July 1, 2016, with late fees payable if paid after August 1, 2016. If the quarterly payment option is chosen, the first payment is due July 1, 2016, with subsequent payments due October 1, 2016, January 1, 2017 and April 1, 2017. If the assessment is paid late the appropriate late fee is to be included in the payment.

AMOUNT DUE \$ _____

This is an _____ ANNUAL PAYMENT OR _____ QUARTERLY PAYMENT

I, _____, on behalf of _____ declare under
[name of signatory] [regulated entity]

penalty of perjury under the laws of the State of Nevada that I have carefully examined the foregoing information provided to the Public Utilities Commission of Nevada, and declare it to be a complete and correct statement to the best of my knowledge, information and belief; and that I have the authority to make these representations and to bind the regulated entity on whose behalf I am providing this information. I further declare that the foregoing information has been prepared by me or under my direction.

Signature: _____

Date: _____